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## Filing Date Application Number **MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET** Substitute for Form PTO-1360 (For use with Form PTO/SB/06) May be used for additional claims or amendments CLAIMS AFTER FIRST AFTER SECOND **AMENDMENT** AMENDMENT Indep Depend Depend Indep Depend Indep Depend Indep Depend Indep Depend Indep 72 · .25 Total Total Indep Indep Total Total Depend Depend Total Total

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Claims